


SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:



COMPLETE THIS SECTION ON DELIVERY

- A. Signature  ☒ Agent ☐ Addressee
- B. Received by (Printed Name) 24042 W. 11-27-04 C. Date of Delivery
- D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

3. Service Type ☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

Article Number 7003 1680 0000 0330 3941

2. Article Number

(Transfer from service label)

PS Form 3811, August 2001

61-374 (Rev. 38) BN

Domestic Return Receipt

102595-0234-1540